

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
1						
2						
3						
4						
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35						
36		/				
37		/				
38		/				
39		/				
40		/				
41						
42						
43		/				
44		/				
(45)	/					
46		/				
47		/				
48		/				
(49)	/					
(50)	/					
Total Indep.	7					
Total Depend.	6					
Total Claims	13					

May be used for additional claims or amendments

	INDEP.		DEPEND.		TOTAL	
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
51		/				
52		/				
53		/				
54		/				
(55)	/	/				
56		/				
(57)	/	/				
(58)	/	/				
59		/				
60						
(61)	/	/				
62		/				
63		/				
64		/				
(65)	/	/				
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96						
97						
98						
99						
100						
Total Indep.						
Total Depend.						
Total Claims						